

# MEMBERSHIP ENROLLMENT FORM

MEMBERSHIP PERKS & DETAILS (PLEASE PRINT CLEARLY)	PUNCH PASS	MONTHLY	ANNUAL
· Available to Child, Youth, Teen, Adult, Senior, or Family*			
· Full access to entire facility for the duration of membership/pass purchased (Age restrictions may apply)			
· Early registration benefits on Abbey Centre programs			
· Two (2) complimentary day passes for annual memberships (must be the same age / membership category)			
<b>Complimentary Pass #1</b> <input type="text"/> <b>Pass #2</b> <input type="text"/>			
· Registered and Drop In Fitness Classes			
· Eligible for monthly credit card charge			
· Non-refundable or cancellable <sup>1</sup>			
· Ability to place a freeze on the membership an unlimited number of times.			

**MEMBER INFORMATION** (PLEASE PRINT CLEARLY)      **MEMBERSHIP#**

Select Membership       Child    Youth    Teen    Adult    Senior    Family      Punch Pass    Monthly   
 Monthly (ongoing)    Annual

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Phone # \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Lacombe County Resident?

Town/City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone # \_\_\_\_\_

Medical Conditions?  Optional

**List Child Names** for family membership only \*(2 adults and all children living in the same residence)

2<sup>nd</sup> Adult First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
 Phone # \_\_\_\_\_

Child #1 First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Child #2 First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Child #3 First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Child #4 First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birthdate \_\_\_\_\_

# WAIVER/CONSENT FORM

I and said child (if applicable) do hereby agree that I and said child assume all risk of personal injury, death or property loss resulting from any cause whatsoever, including, but not limited to the inherent risk involved with the Town of Blackfalds Community Service Department programs, collision with natural or manmade objects or with other persons, or from the negligence, breach of contract, or breach of statutory duty of care on the part of the Town of Blackfalds, Town of Blackfalds, the Blackfalds & District Recreation, Culture and Parks Board, the Community Services Department Staff, their supervisors, directors, officers, coordinators, managers, employees, contractors, and agents (hereinafter collectively referred to as "the Town").

I and said child do agree that the Town shall not be liable for any personal injury, death, or property loss from any cause of nature whatsoever, including but not limited to, the negligence of the Town, and hereby release the Town, and waive any and all claims with respect thereto.

I and said child agree that any litigation involving injuries, death or property loss arising out of said child's participation in the Town programs shall be brought within the province of Alberta and that any and all rights, duties and obligations as between I and said child and the Town shall be governed by and interpreted in accordance with the laws of Alberta.

## Cancellation/Refund Policy

Monthly memberships and 10 punch passes are non refundable and cannot be cancelled.

Annual memberships may be cancelled or refunded only with a valid medical

certificate or proof of permanent relocation outside a 50 km radius from Blackfalds.

Members may choose to leave a credit on their account for up to one year for future use or request a refund.

Refunds may take up to 30 days to process.

No refunds will be issued if the cancellation request is made within 3 weeks of the membership expiration.

Refunds or credits will be processed once a medical note or proof of new residency has been received and cannot be backdated.

## Membership Freeze

Monthly members may freeze their membership for medical reasons with no penalty provided there is still one (1) week minimum remaining on the membership and a medical note is provided,

Annual members may have unlimited freezes placed on their membership for the reason of their choice provided there is still one (1) week minimum remaining on the membership.

All freezes are a minimum of one (1) week.

## Abbey Newsletter

Please let us know if you would like to receive our monthly electronic newsletter with all of Abbey's latest news, programs and specials.

Canada's anti-spam law requires us to obtain express consent from the public before we can send any commercial electronic messages. By checking the "Yes" box, you agree to receive commercial content from us.

Yes  No

## Media Consent

I UNDERSTAND photographs and/or video and/or audio recordings of me may be circulated widely and that, if posted on the Town of Blackfalds and other websites, they will be available to the public.

I further understand that the Town of Blackfalds has no control over, and is not responsible for, the use or misuse of materials including my photograph and/or video and/or audio recordings of me.

FOR THE PURPOSE STATED ABOVE, I CONSENT to be photographed and/or to be video and/or audio recorded by the Town of Blackfalds or its authorized representatives.

I ALLOW the Town of Blackfalds and its representatives to use, reproduce, publish, transmit, distribute, broadcast and display any photograph and/or video and/or audio recording that contains my image and/or voice along with my name in any Town of Blackfalds publication, multimedia production, video, CD-ROM, DVD, display, advertisement and/or on the municipality's website or other social media web sites without further notice or my approval of finished photographs and/or video and/or audio recordings.

I can, at any time, opt out of this media consent by providing written notice to Communications at the Town of Blackfalds.

Please indicate your choice:

Yes  No

Member Signature (If under 18 - Parent / Guardian Signature)

Date (MM/DD/YY)

Personal information collected on this form will be used to facilitate enrollment in programs offered by the Town of Blackfalds. This information is collected under the authority of Section 4(c) of the Protection of Privacy Act and will be protected under Part 1 of the Act. Questions regarding the collection and/or use of this information may be directed to the Information Governance Coordinator at [access@blackfalds.ca](mailto:access@blackfalds.ca) or by phone at 403.885.6370.

**BLACKFALDS**  
ALBERTA